



GREENVILLE COUNTY LEGISLATIVE DELEGATION
301 UNIVERSITY RIDGE, SUITE 2400
GREENVILLE, SOUTH CAROLINA 29601
(864) 467-7105
FAX (864) 467-7151

QUESTIONNAIRE FOR APPOINTMENT TO BOARDS AND COMMISSIONS

Date _____

Name _____

Voter Registration # _____

Home Address _____

Mailing Address _____

Senate District _____ House District _____

1. Board or Commission sought _____

2. Occupation (be specific as to what you do) _____

3. Occupation of members of household _____

4. Education (high school graduate, college graduate, if so, what degree(s) and schools attended?)

5. For what reason(s) do you feel you are qualified for the appointment or reappointment?

6. Do you possess any particular expertise that would benefit the board or commission to which you seek appointment or reappointment?

7. For what reason(s) are you seeking this appointment or reappointment?

8. Are there any business associations, which could conflict with your appointment or reappointment?

9. Do you have any real estate interests that could relate to your appointment or reappointment?

10. Do you conduct any business with the board or commission to which you seek appointment or reappointment?

11. Do you have any health-related problems that would hinder you in the performance of your responsibilities if appointed or reappointed? If so, state conditions.

12. Do you have any relative employed by the county or by the commission or board to which you seek appointment or reappointment? If, give name and position.

13. Are you or any member of your immediate family related to a member of the Greenville County Legislative Delegation? If yes, who?

14. Do you currently serve on this board or commission? If so, how long have you served?

15. Do you currently serve on any other local or State board, commission, committee, or elected office? If so, list:

Important: It is the responsibility of the applicant to secure the commitment of a Delegation Member to nominate you. You cannot be elected if you are not nominated.

For Incumbents Only:

Number of meetings held by board/commission during your last term of office _____

Number attended by applicant _____

I hereby certify that the information provided is true and correct to the best of my knowledge.

Applicant's Signature

Date